

Customer No. 26308

Docket No. 9469.18533

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Mail Stop Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450



**26308**

PATENT TRADEMARK OFFICE

**PATENT**

19270 U.S. PTO  
10/777771

**NEW APPLICATION TRANSMITTAL Under 37 CFR § 1.53(b)**

Transmitted herewith for filing is the patent application of

Inventor(s): **Geoffrey B. Thrope, Robert Strother, Joseph Mrva**

**WARNING:** 37 C.F.R. § 1.41(a)(1) points out:

(a) A patent is applied for in the name or names of the actual inventor or inventors.

- (1) The inventorship of a nonprovisional application is that inventorship set forth in the oath or declaration as prescribed by § 1.63, except as provided for in § 1.53(d)(4) and § 1.63(c). If an oath or declaration as prescribed by § 1.63 is not filed during the pendency of a nonprovisional application, the inventorship is that inventorship set forth in the application papers filed pursuant to § 1.53(b), unless a petition under this paragraph accompanied by the fee set forth in § 1.17(i) is filed supplying or changing the name or names of the inventor or inventors.

For (title): **Portable Percutaneous Assemblies, Systems and Methods for Providing Highly Selective Functional or Therapeutic Neuromuscular Stimulation**

**1. Type of Application**

This new application is for a(n)

- ☒ Original (nonprovisional)  
☐ Design  
☐ Plant

**NOTE:** If one of the following 3 items apply then complete and attach **ADDED PAGES FOR NEW APPLICATION TRANSMITTAL WHERE BENEFIT OF A PRIOR U.S. APPLICATION CLAIMED** and a **NOTIFICATION IN PARENT APPLICATION OF THE FILING OF THIS CONTINUATION APPLICATION**.

- ☐ Divisional.  
☐ Continuation.  
☐ Continuation-in-part (C-I-P).

**2. Benefit of Prior U.S. Application(s) (35 U.S.C. 119(e), 120, or 121)**

- ☐ The new application being transmitted claims the benefit of prior U.S. application(s). Enclosed are **ADDED PAGES FOR NEW APPLICATION TRANSMITTAL WHERE BENEFIT OF PRIOR U.S. APPLICATION(S) CLAIMED**.

**CERTIFICATION UNDER 37 C.F.R. 1.10\***

I hereby certify that this New Application Transmittal and the documents referred to as attached therein are being deposited with the United States Postal Service on this date 12 February 2004, in an envelope as 'Express Mail Post Office to Addressee' mailing Label Number EV 318692999 US, addressed as follows: Mail Stop Patent Application, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450

Julie A. Wolf

(type or print name of person mailing paper)

Julie A. Wolf  
Signature of person mailing paper

(Application Transmittal - page 1 of 5)

**3. Papers Enclosed**

A. Required for filing date under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 Design Application

<u>24</u>	Pages of specification
<u>6</u>	Pages of claims
<u>1</u>	Abstract
<u>8</u>	Sheets of drawing
<input checked="" type="checkbox"/>	formal
<input type="checkbox"/>	informal

B. Other documents enclosed: \_\_\_\_\_

**4. Additional papers enclosed**

- ☐ Preliminary Amendment
- ☐ Information Disclosure Statement (37 C.F.R. 1.98)
- ☐ Form PTO-1449 (PTO/SB/08A and 08B)
- ☐ Citations
- ☐ Declaration of Biological Deposit
- ☐ Submission of "Sequence Listing," computer readable copy and/or amendment pertaining thereto for biotechnology invention containing nucleotide and/or amino acid sequence.
- ☐ Authorization of Attorney(s) to Accept and Follow Instructions from Representative
- ☐ Special Comments
- ☐ Other

**5. Declaration or oath**

- ☐ Enclosed
  - ☐ newly executed
  - ☐ copy from parent application identified above
- Executed by (*check all applicable boxes*)
  - ☐ inventor(s).
  - ☐ legal representative of inventor(s).
  - ☐ joint inventor or person showing a proprietary interest on behalf of inventor who refused to sign or cannot be reached.
    - ☐ This is the petition required by 37 CFR 1.47 and the statement required by 37 CFR 1.47 is also attached. See Item 13 below for fee.
- ☒ Not Enclosed.
  - ☒ Application is made by a person authorized under 37 C.F.R. 1.41(c) on behalf of all the above named inventor(s). (The declaration or oath, along with the surcharge required by 37 CFR 1.16(e) can be filed subsequently).

**6. Inventorship Statement**

The inventorship for all the claims in this application are:

- ☒ The same.
- ☐ Not the same. An explanation, including the ownership of the various claims at the time the last claimed invention was made
  - ☐ is submitted.
  - ☐ will be submitted.

7. **Language**

☒ English

☐ Non-English

☐ The attached translation includes a statement that the translation is accurate. 37 C.F.R. 1.52(d).

8. **Assignment**

☒ An assignment of the Invention to NDI Medical, LLC

☐ is attached. A separate ☐ COVER SHEET FOR ASSIGNMENT (DOCUMENT) ACCOMPANYING NEW PATENT APPLICATION or ☐ FORM PTO 1595 is also attached.

☒ will follow.

☐ was filed in the parent application identified above

9. **CERTIFIED COPY**

Certified copy(ies) of application(s)

Country	Appln. No.	Filed
Country	Appln. No.	Filed
Country	Appln. No.	Filed
Country	Appln. No.	Filed

from which priority is claimed

☐ is (are) attached.

☐ will follow.

NOTE: The foreign application forming the basis for the claim for priority must be referred to in the oath or declaration. 37 CFR 1.55(a) and 1.63.

10. **Fee Calculation (37 C.F.R. 1.16)**

A. ☒ Regular application

CLAIMS AS FILED					
	Number Filed	Number Included in Basic Fee	Number Extra	Rate	Basic Fee 37 CFR 1.16(a) \$770.00
Total Claims 37 CFR 1.16(c)	35	-20 =	15	x \$ 18.00	\$270
Independent Claims (37 CFR 1.16(b))	4	-3 =	1	x \$ 86.00	\$86
Multiple Dependent claim(s) if any (37 CFR 1.16(d))	1			\$290.00	\$290
<b>FILING FEE CALCULATION</b>					<b>\$1,416</b>

☐ Amendment cancelling extra claims enclosed.

☐ Amendment deleting multiple-dependencies enclosed.

☐ Fee for extra claims is not being paid at this time.

Filing Fee Calculation

\$1,416.00

- B. ☐ Design application  
(\$340.00 - 37 CFR 1.16(f))  
Filing Fee Calculation \_\_\_\_\_
- C. ☐ Plant application  
(\$530.00 - 37 CFR 1.16(g))  
Filing Fee Calculation \_\_\_\_\_

**11. Small Entity Statement**

- ☒ The applicant is a Small Entity as defined by 37 CFR 1.9 and 1.27 and is entitled to small entity status.  
☒ Small Entity Filing Fee: \$708.00

**12. Fee Payment Being Made at This Time**

- ☒ Not Enclosed  
☒ No filing fee is to be paid at this time.  
(*This and the surcharge required by 37 C.F.R. 1.16(e) can be paid subsequently.*)
- ☐ Enclosed
- |   |                      |
|---|----------------------|
| <input type="checkbox"/> Filing fee   | _____                |
| <input type="checkbox"/> Recording assignment<br>(\$40.00; 37 C.F.R. 1.21(h))   | _____                |
| <input type="checkbox"/> Petition fee for filing by other than all the<br>inventors or person on behalf of the inventor<br>where inventor refused to sign or cannot be<br>reached<br>(\$130.00; 37 C.F.R. 1.47 and 1.17(i)) | _____                |
| <input type="checkbox"/> For processing an application with a<br>specification in a non-English language<br>(\$130.00; 37 C.F.R. 1.52(d) and 1.17(k))   | _____                |
| <input type="checkbox"/> Processing and retention fee<br>(\$130.00; 37 C.F.R. 1.53(d) and 1.21(l))  | _____                |
| <input type="checkbox"/> Fee for international-type search report<br>(\$40.00; 37 C.F.R. 1.21(e))   | _____                |
| <b>Total fees enclosed</b>  | <b><u>\$0.00</u></b> |

**13. Method of Payment of Fees**

- ☐ Check in the amount of \$\_\_\_\_\_.
- ☐ Charge Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.
- A duplicate of this transmittal is attached.

**14. Authorization to Charge Additional Fees**

- ☐ The Commissioner is hereby authorized to charge the following additional fees by this paper and during the entire pendency of this application to Account No. \_\_\_\_\_
- |   |
|---|
| <input type="checkbox"/> 37 C.F.R. 1.16(a), (f) or (g) (filing fees)  |
| <input type="checkbox"/> 37 C.F.R. 1.16(b), (c) and (d) (presentation of extra claims)  |
| <input type="checkbox"/> 37 C.F.R. 1.16(e) (surcharge for filing the basic filing fee and/or declaration on a date later than the filing date of the application) |
| <input type="checkbox"/> 37 C.F.R. §§ 1.17(a)(1-5) (extension fees pursuant to § 1.136(a)).   |
| <input type="checkbox"/> 37 C.F.R. 1.17 (application processing fees)   |
| <input type="checkbox"/> 37 C.F.R. 1.18 (issue fee at or before mailing of Notice of Allowance, pursuant to 37 C.F.R. 1.311(b))                                   |

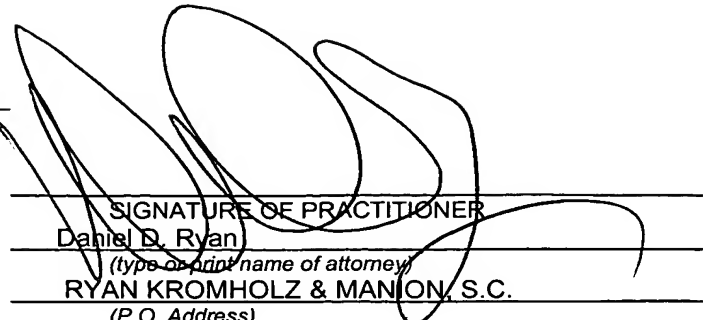
**15. Instructions as to Overpayment**

- ☐ Credit Account No. \_\_\_\_\_  
☐ Refund

Reg. No. 29,243

Tel. No.: (262) 783 - 1300

Customer No.: 26308

  
\_\_\_\_\_  
SIGNATURE OF PRACTITIONER  
Daniel D. Ryan  
(type or print name of attorney)  
\_\_\_\_\_  
RYAN KROMHOLZ & MANION, S.C.  
(P.O. Address)  
\_\_\_\_\_  
Post Office Box 26618  
\_\_\_\_\_  
MILWAUKEE, WISCONSIN 53226-0618

**[ ] Statement Where Additional Pages are Added**

- ☐ Plus Added Page for New Application Transmittal Where Benefit of Prior U.S. Application(s) Claimed

**[ X ] Statement Where No Further Pages Added**

(if no further pages form a part of this Transmittal, then end this Transmittal with this page and check the following item)

- ☒ This transmittal ends with this page.